<b>PHA</b>	5-Year	and
Annı	ıal Plan	

#### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information PHA Name: Clermont Metropolitan Housing PHA Type: ☐ Small ☐ High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	PHA Code: OH038  HCV (Section 8)					
2.0	<b>Inventory</b> (based on ACC units at time of F Number of PH units: 219	Y beginning	in 1.0 above) Number of HCV units: 8	91					
3.0	Submission Type  ☐ 5-Year and Annual Plan	Annual 1	Plan Only	5-Year Plan Only					
4.0	PHA Consortia	HA Consorti	a: (Check box if submitting a join	nt Plan and complete table bel	low.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Unit Program PH	ts in Each			
	PHA 1: PHA 2:				111	TIC V			
5.0	PHA 3: 5-Year Plan. Complete items 5.1 and 5.2 on	ly at 5 Vaar	Dlan undata						
	•	•	•						
5.1	<b>Mission.</b> State the PHA's Mission for servir jurisdiction for the next five years:	ng the needs	of low-income, very low-income	, and extremely low income fa	amilies in the P	PHA's			
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.								
	PHA Plan Update								
6.0	<ul> <li>(a) Identify all PHA Plan elements that have No plan elements have been revised since</li> <li>(b) Identify the specific location(s) where the elements, see Section 6.0 of the instruction Housing Authority's Administrative Office</li> </ul>	e the last plan e public may ons. The pub	n submission.  obtain copies of the 5-Year and olic may obtain copies of the 5 Year.	Annual PHA Plan. For a con ear and Annual Plan at the Cl	ermont Metrope	olitan			
	public at the Authority's Administrative (	Office.							
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.  CMHA will not be applying for Hope VI or Mixed Finance Modernization or Development  No Demolition or Disposition activities are planned.  No Public Housing Conversion activities are planned.  CMHA has not applied for a homeownership program.  CMHA does not have a project based voucher program.								
8.0	Capital Improvements. Please complete Pa	arts 8.1 throu	gh 8.3, as applicable.						
8.1	Capital Fund Program Annual Statement, complete and submit the Capital Fund Program open CFP grant and CFFP financing. CMHz current year and all open Capital Fund Grant	ram Annual S A has comple	Statement/Performance and Eval	uation Report, form HUD-50	075.1, for each	current and			
8.2	Capital Fund Program Five-Year Action I Program Five-Year Action Plan, form HUD- for a five year period). Large capital items n included as part of this year's Annual Plan.	-50075.2, and	d subsequent annual updates (on	a rolling basis, e.g., drop curr	ent year, and ad	ld latest year			
8.3	Capital Fund Financing Program (CFFP).  Check if the PHA proposes to use any pofinance capital improvements.		apital Fund Program (CFP)/Repl	acement Housing Factor (RH	F) to repay deb	t incurred to			

Revised 7/13/06 Form HUD-50075 8/2006

- **Housing Needs**. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.
- 9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
- 10.0 Additional Information. Describe the following, as well as any additional information HUD has requested.
  - (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-
  - (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

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Part I:	Summary									
PHA Nai	me: Clermont Metropolitan	Grant Type and Number Capital Fund Program Grant No: 501 Replacement Housing Factor Grant N Date of CFFP:	.11 lo:			FFY of Grant: 2011 FFY of Grant Approval: 2011				
		☐ Reserve for Disasters/Emergencies t for Period Ending: 9/30/11		<ul> <li>☑ Revised Annual Statement (revision no: 1 )</li> <li>☐ Final Performance and Evaluation Report</li> </ul>						
Line	Summary by Development			Total Estimated Cost	•	Total Actual Cost 1				
			Original	Revised <sup>2</sup>	Obligated	Expended				
1	Total non-CFP Funds									
2	1406 Operations (may not ex	ceed 20% of line 21) <sup>3</sup>	47,468							
3	1408 Management Improven	nents								
4	1410 Administration (may no	ot exceed 10% of line 21)	31,032	19,849						
5	1411 Audit									
6	1415 Liquidated Damages									
7	1430 Fees and Costs		23,000	23,000						
8	1440 Site Acquisition									
9	1450 Site Improvement		32,500	32,500						
10	1460 Dwelling Structures		218,500	218,300						
11	1465.1 Dwelling Equipment-	—Nonexpendable								
12	1470 Non-dwelling Structure	S								
13	1475 Non-dwelling Equipme	nt								
14	1485 Demolition									
15	1492 Moving to Work Demo	nstration								
16	1495.1 Relocation Costs									
17	1499 Development Activities	3 <sup>4</sup>								

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	ummary								
PHA Nam Clermont Metropolit	tan	Grant Type and Number Capital Fund Program Grant No: 501.11 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2011 FFY of Grant Approval: 2011				
Type of G	rant								
Origi	inal Annual S	Statement Reserve for Disasters/Emergen	cies		Revised Annual Statement (revision no:	1)			
Perfo	rmance and	Evaluation Report for Period Ending: 9/30/11			☐ Final Performance and Evaluation Repo	ort			
Line	Line Summary by Development Account			Total Estimated Cost		ctual Cost 1			
			Original	I Revised	2 Obligated	Expended			
18a	1501 Collat	teralization or Debt Service paid by the PHA							
18ba	9000 Collat	teralization or Debt Service paid Via System of Direct Payment							
19	1502 Contin	ngency (may not exceed 8% of line 20)							
20	Amount of	Annual Grant:: (sum of lines 2 - 19)	352,500	293,6	549				
21	Amount of	line 20 Related to LBP Activities	,						
22	Amount of	line 20 Related to Section 504 Activities							
23	Amount of	line 20 Related to Security - Soft Costs							
24	Amount of	line 20 Related to Security - Hard Costs							
25	Amount of	line 20 Related to Energy Conservation Measures							
Signatur	re of Execu	utive Director Sarah Tyo Date 08/31/201	Signature of Public H	ousing Director	Date				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page	es								
PHA Name: Clermont N	Capital I CFFP (Y	Grant Type and Number Capital Fund Program Grant No: 501.11 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Feder	Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Wor Categories		Development Account No.	Quantity	Total Estin	mated Cost	Cost Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
OH038051967	Public Housing Shortfall		1406		47,468				
OH038051967	Partial salary for Executive Dir	rector	1410		5,116	1,274			
OH038051967	Partial salary for CF Inspector		1410		23,858	17,375			
OH038051967	Partial salary for Financial Specialist		1410		1,858	1,000			
OH038051967	Sundry expenses for Capital Fund		1410		200	200			
OH038051967	Architect, permits, fees		1430		23,000	23,000			
OH038051967	Replace sewer line to the street	t	1450	1 location	3,500	3,500			
OH038051967	Replace privacy fence		1450	1 location	5,000	5,000			
OH038051967	Replace shed doors		1450	50 units	24,000	24,000			
OH038051967	Replace bathtub, surround & fa	aucet	1460	25 units	63,000	63,000			
OH038051967	Install new floor tile and stair t	read	1460	8 units	28,000	28,000			
OH038051967	Replace sagging floor		1460	1 location	5,500	5,300			
ОН038051967	Replace refrigerator and range		1465.1	88 units	122,000	122,000			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es									
PHA Name: Clermont Metropolitan Housing Authority  GC CR			Grant Type and Number Capital Fund Program Grant No: 501.11 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Sci					
PHA Name: Clermont Metr	opolitan Housing Aut	hority			Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities		d Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
DH0380051967	08/03/2013		08/02/2015		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I:	Summary					
	ame: Clermont Metropolitan g Authority	Grant Type and Number Capital Fund Program Grant No:501.10 Replacement Housing Factor Grant No: Date of CFFP:				FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of ☐ Orig ☐ Perf		☐ Reserve for Disasters/Emergencies t for Period Ending:		☐ Revised Annual Stater☐ Final Performance and		
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	sceed 20% of line 21) <sup>3</sup>	90,532		90,532	90,532
3	1408 Management Improver	ments				
4	1410 Administration (may no	ot exceed 10% of line 21)	32,000		32,000	56
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		18,000			
8	1440 Site Acquisition					
9	1450 Site Improvement		64,000			
10	1460 Dwelling Structures		118,888			
11	1465.1 Dwelling Equipment	—Nonexpendable	30,000			
12	1470 Non-dwelling Structure	es	,			
13	1475 Non-dwelling Equipme	ent				
14	1485 Demolition					
15	1492 Moving to Work Demo	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities	S <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	Summary						
PHA Nam Clermont Metropoli Housing A	Grant Type and Nu Capital Fund Progran	n Grant No: 501.10				FFY of Grant: FFY of Grant Approval: 2010	
	rant inal Annual Statement	☐ Reserve for Disasters/Emerger	ncies		□ F	Revised Annual Statement (revision no:	)
Nerfo	ormance and Evaluation Report f	or Period Ending:				Final Performance and Evaluation Rep	
Line	ne Summary by Development Account			Total Estimated Co			Actual Cost 1
			Origina		Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt S	ervice paid by the PHA					
18ba	9000 Collateralization or Debt So Paymen	ervice paid Via System of Direct it					
19	1502 Contingency (may not exce	eed 8% of line 20)					
20	Amount of Annual Grant:: (sum	of lines 2 - 19)	353,420			122,532	90,588
21	Amount of line 20 Related to LB	P Activities					
22	Amount of line 20 Related to Sec	ction 504 Activities					
23	Amount of line 20 Related to Sec	curity - Soft Costs					
24	Amount of line 20 Related to Sec	curity - Hard Costs					
25	Amount of line 20 Related to En	ergy Conservation Measures					
Signatur	re of Executive Director $S$	arah Tyo Date 8/31/2011	•	Signature of I	Public Ho	using Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page	es								
PHA Name: Clermont N	Grant Type and Number Capital Fund Program Grant No: 501.10 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal	Federal FFY of Grant: 2010			
Development Number	General Description of Major	Work	Development	Quantity	Total Estin	nated Cost	Total Actual	Cost	Status of Work
Name/PHA-Wide	Categories		Account No.						
Activities									
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
ОН038051967	Public Housing Shortfall		1406		90,532		90,532		
OH038051967	Partial salary for Executive Director		1410		5,439		5,439	90,532	complete
OH038051967	Partial salary for CF Inspector		1410		24,181		24,181		in process
ОН038051967	Partial salary for Financial Specialist		1410		2,180		2,180		in process
OH038051967	Sundry expenses for Capital Fu	nd	1410		200		200		in process
OH038051967	Architect, permits, fees		1430		18,000				in process
OH038051967	Replace all walkway posts		1450	1 site	36,466				in process
OH038051967	Replace greenhouse		1450	1 site	10,000				in process
OH038051967	Remove large trees		1450	1 site	15,000				in process
OH038051967	Replace light poles		1450	2 sites	17,000				in process
ОН038051967	Replace dumpster enclosures		1450	2 sites	18,000				in process
ОН038051967	Replace concrete entrance		1450	1 site	4,000				in process
ОН038051967	Replace concrete patio		1460	2 sites	4,000				in process
ОН038051967	Replace concrete driveway		1460	1 site	3,500				in process
OH038051967	Replace baseboard heaters, rece heaters and thermostats	ess	1460	65 units	36,200				in process
ОН038051967	Replace main water valve		1460	65 units	8,722				in process
ОН038051967	Replace floor tile and stair tread	l	1460	5 units	30,000				in process
ОН038051967	Replace air conditioners		1465	65 units	30,000				in process

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

 $<sup>^{\</sup>rm 2}$  To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es									
			Grant Type and Number Capital Fund Program Grant No: 501.10 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
									-	
									-	
						-				
									+	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name: Clermont Metr		d Financing Program			E. L. 1 DEV. 6 C 2010
TIA Name. Cicimoni Wich	opontan Housing Aut	nority			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	Name/PHA-Wide (Quarter Ending Date) Activities			s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
ОН038051967	07/14/2012		07/14/2014		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

art III: Implementation Sch	edule for Capital Fun	d Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter I	l Obligated Ending Date)	All Fund (Quarter I	s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Summary					
	ame: Clermont Metropolitan g Authority	Grant Type and Number Capital Fund Program Grant No: OH10 Replacement Housing Factor Grant No: Date of CFFP:	S03850109			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Orig	Grant ginal Annual Statement formance and Evaluation Repor	☐ Reserve for Disasters/Emergencies t for Period Ending:		☐ Revised Annual States ☑ Final Performance and Eval		)
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost 1
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	sceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improver	ments				
4	1410 Administration (may no	ot exceed 10% of line 21)	36,412		36,412	36,412
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		19,018		19,018	19,018
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		364,519		364,519	364,519
11	1465.1 Dwelling Equipment	—Nonexpendable			,	,
12	1470 Non-dwelling Structure	es				
13	1475 Non-dwelling Equipme	ent				
14	1485 Demolition					
15	1492 Moving to Work Demo	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activitie	s <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	Summary				
PHA Nam Clermont Metropoli Housing A	Grant Type and Number Capital Fund Program Grant No: OH10S03850109 Replacement Housing Factor Grant No:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of G	rant inal Annual Statement Reserve for Disasters/Emerge	ancios		Revised Annual Statement (revision no	
	_	encies	_	`	, <b>,</b>
Line	ormance and Evaluation Report for Period Ending:  Summary by Development Account	Т	Cotal Estimated Cost	Performance and Evaluation Report  Total	Actual Cost <sup>1</sup>
Line	Summary by Development Account	Original	Revised <sup>2</sup>		Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$419,949		\$419,949	\$419,949
21	Amount of line 20 Related to LBP Activities			,	,
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatu	re of Executive Director Sarah Tyo Date 08/	31/2011	Signature of Public Ho	ousing Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page	es								
PHA Name: Clermont N	Metropolitan Housing Authority	Capital CFFP (Y	Type and Number Fund Program Grant I Yes/ No): ment Housing Factor		50109	Federa	FFY of Grant: 2	2009	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work	Development Account No.  Quantity Total Estimated		nated Cost	Total Actual	Status of Work		
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
ОН038051967	Salaries and administrative exp	enses	1410		36,412		36,412	36,412	complete
ОН038051967	Architect		1430		19,018		19,018	19,018	complete and paid
ОН038051967	Replacement of shingle roofs, gutters, downspouts and flashiall buildings		1460	3 sites	364,519		364,519	364,519	complete and paid
			1						
			1						

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement. <sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es								
	Metropolitan Housing Authority	Capital F CFFP (Y	Type and Number Fund Program Grant N Tes/ No): nent Housing Factor C		0109	Federal	FFY of Grant: 2	009	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Sch	nedule for Capital Fun	d Financing Program			
PHA Name: Clermont Metro	opolitan Housing Aut		Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities		d Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
ОН038051967	3/17/2010		3/17/2012		
L					

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I:	Summary					
PHA Na	me: Clermont Metropolitan	Grant Type and Number Capital Fund Program Grant No: 501.0 Replacement Housing Factor Grant No Date of CFFP:	)9 o:			FFY of Grant: 2009 FFY of Grant Approval: 2009
⊠ Perfo	al Annual Statement  ormance and Evaluation Repor			☐ Revised Annual Statemen ☐ Final Performance and E	nt (revision no: ) valuation Report	
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost 1
	T 1 CED E 1		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	ceed 20% of line 21) 3	47,693		47,693	47,693
3	1408 Management Improven	nents			·	-
4	1410 Administration (may no	ot exceed 10% of line 21)	31,507	31,507	31,507	8,087
5	1411 Audit			·	·	
6	1415 Liquidated Damages					1
7	1430 Fees and Costs		23,000		22,500	21,414
8	1440 Site Acquisition					
9	1450 Site Improvement		2,000	2,000	2,000	2,000
10	1460 Dwelling Structures		252,563	249,146	249,146	224,031
11	1465.1 Dwelling Equipment-	—Nonexpendable				
12	1470 Non-dwelling Structure	es				
13	1475 Non-dwelling Equipme	ent				
14	1485 Demolition					
15	1492 Moving to Work Demo	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities	S <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	Summary				
PHA Nam Clermont Metropoli	Grant Type and Number Capital Fund Program Grant No. 501 00			FFY of Grant 2009 FFY of Grant Approval: 2009	
Type of G	Frant				
Origi	inal Annual Statement Reserve for Disasters/Emerg	gencies		Revised Annual Statement (revision no	: )
Perfo	ormance and Evaluation Report for Period Ending			Final Performance and Evaluation Rep	
Line	Summary by Development Account	7	Total Estimated Cost	Total	Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	356,763		352,846	301,225
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	re of Executive Director Sarah Tyo Date	8/31/2011	Signature of Public Ho	ousing Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page		~ _								
		Capital F CFFP (Y	ant Type and Number pital Fund Program Grant No: 501.09 FP (Yes/ No): placement Housing Factor Grant No:				Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estin	Total Estimated Cost		Total Actual Cost		
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
OH038051967	Public Housing Shortfall		1406		47,693		47,693	47,693	complete	
ОН038051967	Salaries and administrative exp	enses	1410		31,507		31,507	8,087	in process	
OH038051967	Architect, permits, fees		1430		23,000		22,500	21,414	in process	
ОН038051967	Replace shower unit, faucet and accessories	d	1460	58 units	137,442		184,441	174,070	in process	
ОН038051967	Replace floor tile in bathroom, and entryway	kitchen	1460	65 units	75,131		21,606	17,420	in process	
ОН038051967	Replace toilet & shut off valve		1460	65 units	13,000		14,527	10,341	in process	
OH038051967	Install new washer hook up, dr vent, hot water heater and main valve		1460	26 units	19,990		15,886	11,700	in process	
OH038051967	Replace windows		1460	2 units	6,000		12,686	8,500	in process	
ОН038051967	Replace concrete patio at common building	nunity	1450		2,000		2,000	2,000	complete	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es								
	Metropolitan Housing Authority	Capital F CFFP (Y	ype and Number Fund Program Grant No 'es/ No): nent Housing Factor G			Federal	FFY of Grant: 2	009	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work	Development Account No.	Quantity	Total Estima	ated Cost	Cost Total Actual Cost		Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
								+	
								1	

 $<sup>^{\</sup>rm 1}$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Sci PHA Name: Clermont Metr					Federal FFY of Grant: 2009
		J			Teachariff of Grant. 2007
Development Number Name/PHA-Wide Activities	me/PHA-Wide (Quarter Ending Date)			s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
ОН0380051967	09/30/2011		09/30/2013		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name:  Development Number Name/PHA-Wide Activities  Original Obligation End Date  Oligation End Date  Actual Obligation End Date  Original Obligation End Date  Original Obligation End Date  Original Obligation End Date  End Date  Federal FFY of Grant:  Reasons for Revised Target Dates  Actual Expenditure End Date  Date  Actual Expenditure End Date  Original End Date  Original Expenditure End Date  Original End Date  Original Expenditure End Date	Part III: Implementation Schedule for Capital Fund Financing Program						
Name/PHA-Wide Activities  Original Actual Obligation Original Expenditure End Date Obligation End End Date  Name/PHA-Wide (Quarter Ending Date) (Quarter Ending Date)  Actual Expenditure End Date		•	9 5			Federal FFY of Grant:	
Original Actual Obligation Original Expenditure Actual Expenditure End Obligation End Date End Date Date	Name/PHA-Wide	All Fund (Quarter F	Obligated Ending Date)	All Fund (Quarter I	s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>	
		Obligation End		Original Expenditure End Date			

PART I: SUMMARY		
PHA Name/Number	Locality (City/County & State)	<b>⊠Original 5-Year Plan □Revision No:</b>
Clermont Metropolitan Housing Authority	Clermont County	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

A.	Development Number and Name/PHA Wide	Work Statement for Year 1 FFY	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
В	Physical Improvements Subtotal	Annual Statement	\$225,600.00	\$251,500.00	\$170,960.00	\$223,900.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		\$25,700.00	\$2,208.00	-0-	\$3,500.00
Е	ADMINISTRATION		\$31,957.00	\$32,232.00	\$32,350.00	\$33,315.00
F.	Other		\$23,000.00	\$23,000.00	\$15,550.00	\$22,000.00
G.	Operations		\$46,543.00	\$44,968.00	\$106,892.00	\$70,885.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		\$352,800.00	\$353,908.00	\$325,752.00	\$353,600.00
L.	Total Non-CFP Funds					
M.	Grand Total		\$352,800.00	\$353,908.00	\$325,752.00	\$353,600.00

	PART I: SUMMARY (CONTINUATION)						
	PH	A Name/Number		Locality (City/county & State)	<b>⊠Original 5-Year Plan □Revision No:</b>		
	Development Number	Work		Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5	
A.	and Name	Statement for	FFY	FFY	FFY	FFY	
		Year 1					
		FFY					
		Annual					
		Statement					

Work Statement for	Work Statement for Year 2 FFY 2012			Work Statement for Year: 3 FFY 2013		
Year 1 FFY 2011	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost
	Seal coat/stripe parking lot	4 locations	25,700	Install new kitchen cabinet, countertop, faucet and grease shield	63 units	220,500
	Replace walkway roofing	1 location	25,000	Install new windows	1 unit	3,000
	Install new carpet in community room	1 location	10,000	Install culvert/concrete apron drive	1 location	2,208
	Replace all walkway fixtures with Energy Star fixtures	102	30,600	Install new floor tile and stair treads	5 units	28,000
	Install new hot water heaters and expansion tanks	106	53,000			
See	Install new floor tile in community building	2 locations	14,000			
Annual	Install new floor tile/stair treads	5 units	28,000			
Statement	Install new windows	65 units	65,000			
	Sub	total of Estimated Cost	\$251,300.00	Subto	otal of Estimated Cost	\$253,708.00

Work Statement for	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Work Statement for Year: 4 FFY 2014		Work Statement for Year: 5 FFY 2015			
Year 1 FFY2011	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost	
	Replace electric panels and rewire	All buildings at 3 locations	42,505	Install new sewer main	1 location	3,500	
	Replace smoke detectors	All buildings at 3 locations	38,955	Install new Energy Star electric furnaces, heat pumps, thermostats, cold air grills and floor registers	2 locations	218,400	
See Annual Statement	Put in sensory equipment for 504 compliance	2 units	5,000	Replace rear deck with new concrete slab	1 location	2,000	
	Bring 504 compliance up to code to correct deficiencies	3 locations – 12 units	56,500	Replace concrete driveway	1 location	3,500	
	Install new floor tile	5 units	28,000				
		Subtotal of Estimated Cost	\$170,960		Subtotal of Estimated Cost	\$227,400	

# Office of Public and Indian Housing **Expires 4/30/2011**

Part III: Suj	pporting Pages – Management Needs Worl				
Work	Work Statement for Year: 2	2	Work Statement for Year: 3		
Statement for	FFY 2012		FFY 2013		
Year 1 FFY 2011	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	
	Public Housing Shortfall	46,543	Public Housing Shortfall	44,968	
	Partial Salary for Executive Director	5,270	Partial Salary for Executive Director	4,749	
See Annual Statement	Partial Salary for CF Inspector	24,574	Partial Salary for CF Inspector	25,311	
	Partial Salary for Financial Specialist	1,913	Partial Salary for Financial Specialist	1,972	
	Sundry Admin Expenses for CF	200	Sundry Admin Expenses for CF	200	
	Architectural and Engineering Fees	23,000	Architectural and Engineering Fees	23,000	
	Subtotal of Estimated Cost	\$101,500	Subtotal of Estimated Cost	\$100,200	

Part III: Su	pporting Pages – Management Needs Worl	k Statement(s)			
Work Statement for	Work Statement for Year: 4 FFY 2014	4	Work Statement for Year: 5 FFY 2015		
Year 1 FFY 2011	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	
	Public Housing Shortfall	106,892	Public Housing Shortfall	70,885	
	Partial Salary for Executive Director	4,891	Partial Salary for Executive Director	5,038	
See Annual Statement	Partial Salary for CF Inspector	26,070	Partial Salary for CF Inspector	26,852	
	Partial Salary for Financial Specialist	1,189	Partial Salary for Financial Specialist	1,225	
	Sundry Admin Expenses for CF	200	Sundry Admin Expenses for CF	200	
	Architect	15,550	Architect	22,000	
	Subtotal of Estimated Cost	\$154,792	Subtotal of Estimated Cost	\$126,200	

### ATTACHEMENT A RESIDENT COMMENTS

A meeting was held on April 26, 2011 at the Bethel Woods Community building for presentation of the 2011 Annual/Five Year Plan to the Resident Advisory Board. Clients of the Public Housing and Housing Choice Voucher Programs were notified of the meeting. The public meeting for comments regarding the plans was June 27, 2011.

There were four questions from residents regarding Capital Fund work items. The questions were addressed during the meeting.

Comment 1 – What type of air conditioners will be installed at Bethel Woods during Capital Fund 501.10.

Response – The new air conditioners will be very similar to the current ones.

Comment 2 – Could the laundry room at Bethel Woods be enlarged and additional washers and dryers installed.

Response – In preparation for the 2012 Annual/Five Year Plans the Authority will look into seeing if this is a possibility.

Comment 3 – Once trees are removed from the area behind Building 200 at Bethel Woods could the area be cleared and a parking lot for the residents of that building installed.

Response – In preparation for the 2012 Annual/Five Year Plans the Authority will consider whether or not this is the best use of the area behind Building 200.

Comment 4 - Will there be any work done on the parking lot and driveway at Bethel Woods in the near future.

Response – Seal coating and striping of the parking lot at Bethel Woods is in the Five Year Plan for year 2 (2012).

#### ATTACHMENT B VAWA STATEMENT

In order to address the requirement of the Violence Against Women Act, the Clermont Metropolitan Housing Authority revised its Public Housing Admissions and Continued Occupancy Policy and lease as well as its Housing Choice Voucher Administrative Plan. Board Resolution Number 07-1180 was adopted by the Authority's Board of Commissioners on January 29, 2007.

Residents of both the Public Housing and Housing Choice Vouchers programs were notified by mail concerning the policy changes. Residents received a brochure which informed them about their rights under VAWA. At the time Resolution Number 07-1180 was adopted Clermont Metropolitan Housing Authority staff received information regarding the Act and copies of the policy changes. Staff also received the necessary training required to understand the Act, policy changes and how to incorporate them into the day to day business of the Authority.

For the past fourteen years Clermont Metropolitan Housing Authority has had domestic violence as a preference for placement on its waiting lists. Clermont Metropolitan Housing Authority does not have any activities, services or programs for residents in regard to preventing domestic violence. Clermont Metropolitan Housing Authority has an excellent working relationship with the local YWCA and the House of Peace, which provides protective shelter and supportive services for battered women and their children. Currently Clermont Metropolitan Housing Authority is in partnership with the YWCA in the Transitional Living Grant to assist with securing affordable housing for women who are victims of domestic violence in Clermont County.

### Certification for a Drug-Free Workplace

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b. Establishing an on going a up-free awa eness program to follow coupleyors —

- (1) The Sentencial Course of the Cortex deci-
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